

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED

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FEC MAIL CENTER

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

ADDRESS (number and street)

555 East Wells Street, Suite 1100

☐ Check if different than previously reported. (ACC)

Milwaukee

WI

53202

3823

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00324780

3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☒ April 15 Quarterly Report(Q1)
☐ July 15 Quarterly Report(Q2)
☐ October 15 Quarterly Report(Q3)
☐ January 31 Quarterly Report(YE)
☐ July 31 Mid-Year Report(Non-election Year Only) (MY)
☐ Termination Report (TER)

(b) Monthly Report Due On:
☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year Only)
☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year Only)
☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Convention (12C) ☐ Special (12G)

Election on

In the State of

(d) 30-Day Post -Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

in the State of

5. Covering Period 01 01 2012 through 03 31 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dr. William R. Little, MD

Signature of Treasurer

Date

04 11 2012

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

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FEC FORM 3X
(Rev. 02/2003)

12030782372

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

Report Covering the Period:

From:

MM
01

DD
01

YYYY
2012

To:

MM
03

DD
31

YYYY
2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 YYYY 2012		232409.31
(b) Cash on Hand at Beginning of Reporting Period	232409.31	
(c) Total Receipts (from Line 19)	11550.56	11550.56
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	243959.87	243959.87
7. Total Disbursements (from Line 31)	556.00	556.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	243403.87	243403.87
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

12030782373

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

Report Covering the Period:

From:

MM DD YYY
01 01 2012

To:

MM DD YYY
03 31 2012

I. Receipts

COLUMN A Total This Period

COLUMN B Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A)

1900.00

1900.00

(ii) Unitemized

9425.00

9425.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)

11325.00

11325.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs)

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b) and (c)) (Carry

Totals to Line 33, page 5)

11325.00

11325.00

12. Transfers From Affiliated/Other

Party Committees

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5)

0.00

0.00

16. Refunds of Contributions Made

to Federal candidates and Other

Political Committees

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.)

225.56

225.56

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfer (add 18(a) and 18(b))

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

11550.56

11550.56

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

11550.56

11550.56

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	556.00	556.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	556.00	556.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ➤	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	556.00	556.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	556.00	556.00

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DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	11325.00	11325.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11325.00	11325.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	556.00	556.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	556.00	556.00

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 6 / 9	
(check only one)			
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>	17	<input type="checkbox"/>	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

A. Full Name (Last, First, Middle Initial) Andrew H. Bauer Mailing Address 3800 Thomas Avenue S City Minneapolis State MN Zip Code 55410 FEC ID number of contributing federal political committee. C Name of Employer North Memorial Medical Center Occupation MD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼ Aggregate Year-to-Date▼ 250.00		Date of Receipt MM / DD / YYYY 03 / 31 / 2012 Transaction ID: SA11A1.4462 Amount of Each Receipt this Period 250.00 Individual Contributions over \$200
B. Full Name (Last, First, Middle Initial) Crystal Cassidy Mailing Address 526 Trails End City Houston State TX Zip Code 77024 FEC ID number of contributing federal political committee. C Name of Employer Baylor College of Medicine Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼ Aggregate Year-to-Date▼ 500.00		Date of Receipt MM / DD / YYYY 03 / 31 / 2012 Transaction ID: SA11A1.4457 Amount of Each Receipt this Period 500.00 Individual Contributions over \$200
C. Full Name (Last, First, Middle Initial) Brian J. Cutcliffe Mailing Address 212 Chester St. City Menlo Park State CA Zip Code 94025 FEC ID number of contributing federal political committee. C Name of Employer Kaiser Hayward Emergency Depart Occupation MD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼ Aggregate Year-to-Date▼ 200.00		Date of Receipt MM / DD / YYYY 03 / 31 / 2012 Transaction ID: SA11A1.4464 Amount of Each Receipt this Period 200.00 Individual Contributions over \$200

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

950.00

12030782377

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 9

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

Full Name (Last, First, Middle Initial)

A. Dr. Mark A. Foppe

Mailing Address 859 Hanover Way

City

Lakeland

State

FL

Zip Code

33813

FEC ID number of contributing
federal political committee.

C

Name of Employer
South Central Regional Me-
d. Ct

Occupation
Doctor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)▼

Aggregate Year-to-Date▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 31 / 2012

Transaction ID: SA11A1.4456

Amount of Each Receipt this Period

250.00

Individual Contributions
over \$200

Full Name (Last, First, Middle Initial)

B. Lillian Oshva

Mailing Address 4 Peter Cooper Road, 12C

City

New York

State

NY

Zip Code

10010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bellevue/NYU

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify)▼

Aggregate Year-to-Date▼

500.00

Date of Receipt

MM / DD / YYYY
03 / 31 / 2012

Transaction ID: SA11A1.4458

Amount of Each Receipt this Period

500.00

Individual Contributions
over \$200

Full Name (Last, First, Middle Initial)

C. Jeffrey A. Rey

Mailing Address 32 Hyannis Street

City

Laguna Niguel

State

CA

Zip Code

92677-4770

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify)▼

Aggregate Year-to-Date▼

200.00

Date of Receipt

MM / DD / YYYY
03 / 31 / 2012

Transaction ID: SA11A1.4460

Amount of Each Receipt this Period

200.00

Individual Contributions
over \$200

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

1900.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 9

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

Full Name (Last, First, Middle Initial)

A. Capital One Direct Bank

Mailing Address PO Box 4197

City

Houston

State

TX

Zip Code

77210-4197

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)▼

☐ General

Aggregate Year-to-Date▼

222.50

Date of Receipt

MM / DD / YYYY
03 / 31 / 2012

Transaction ID: SA17.4455

Amount of Each Receipt this Period

222.50

Interest from account

SUBTOTAL of Receipts This Page (optional)

222.50

TOTAL This Period (last page this line number only)

222.50

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 9

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

Full Name (Last, First, Middle Initial)

A. US Treasury - IRS

Mailing Address 324 25th Street

City
Ogden

State
UT

Zip Code
84401-2310

Purpose of Disbursement
Form 1120-POL tax payment for 2011

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.4453

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2012

Amount of Each Disbursement this Period

456.00

SUBTOTAL of Disbursements This Page (optional)

456.00

TOTAL This Period (last page this line number only)

456.00

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed Ex</i>	Shipping Date <i>4/12/12</i>
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

[Signature]

PREPARER

(3/2005)

4/16/12
DATE PREPARED

12030782381